



## The Connecticut Women's Health Campaign

African American Affairs Commission  
American Heart Association  
Celebrate Women at UCONN Health Center  
Children's Health Council  
CT Association for Human Services  
CT Association of School Based Health Care  
CT Breast Cancer Coalition, Inc.  
CT Children's Health Project  
CT Chronic Fatigue Immune Dysfunction and Fibromyalgia Assoc.  
CT Citizen's Action Group  
CT Coalition Against Domestic Violence  
CT Coalition for Choice  
CT Community Care, Inc.  
CT Legal Rights Project  
CT NARAL  
CT NOW  
CT Sexual Assault Crisis Services  
CT Women and Disability Network, Inc.  
CT Women's Consortium, Inc.  
Disability Services, City of New Haven  
Hartford College for Women  
Institute for Community Research  
Latino and Puerto Rican Affairs Commission  
National Association of Social Workers-CT Chapter  
National Council of Jewish Women  
National Ovarian Cancer Coalition CT  
Office for Women in Medicine, Yale University  
Older Women's League of NWCT  
Permanent Commission on the Status of Women  
Planned Parenthood of CT, Inc.  
Quinnipiac University Department of Nursing  
Ruthe Boyea Women's Center, Central CT State University  
UConn School of Allied Health  
UConn Women's Center  
Urban League of Greater Hartford, Inc.  
Valley Women's Health Access Program  
Women & Family Life Center

## CONNECTICUT WOMEN'S HEALTH CAMPAIGN

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## Community Support for Elders and People with Disabilities

The Connecticut Women's Health Campaign (CWHC) supports the continuation and expansion of current services to older women and women with disabilities in order to prevent inappropriate and premature institutionalization.

### The Problem

- Connecticut has a growing population of elders who will increasingly rely on services that help them remain independent and in the community of their choice. Individuals who are 85 plus and female make up the fastest growing cohort of elders. This population is projected to increase by nearly a third in the year 2010 to 72,515.
- The number of people with disabilities also continues to grow. With this growth there is a burgeoning movement by those with physical and psychiatric disabilities to remain independent through self-directed care. According to the latest (2000) census, 19% of all citizens have disabilities. Persons with disabilities are often dually eligible for Medicare and Medicaid.
- Older women and women with disabilities wish to remain in a community setting for as long as possible. The cost effectiveness of this choice is clear and it is most certainly the "right thing to do." The state of Connecticut has taken and should continue to take a proactive role in providing comprehensive home and community based services for Connecticut's elderly and disabled women.

### What Can Be Done?

- The Connecticut Home Care Program for Elders Annual Report of state fiscal year 2001 states that a savings of \$55,565,633 has been realized through a responsive system of care management and provision of necessary services. Thousands of Connecticut's frail elders have been maintained safely at home since the inception of the program. There are currently 12,000 active participants and enrollment should continue. The Blueprint for the Future includes a proposal to change asset levels to mirror the ConnPACE Program and to increase care plan limits to more closely approximate the costs of nursing home care.

- The Nursing Home Transition grant is presenting options to disabled individuals to integrate back into the community. The Department of Social Services should provide this population with care management, personal care services, security deposits, furnishings and other necessary services in order that this population can be maintained safely in the community of their choice.
- The Personal Care Assistance Program provides, when appropriate, personal care services to disabled and elderly persons. The program supports people who cannot utilize the current formal system of care under waivers from DMR, the Katie Beckett Waiver and the Elder Waiver. It is suggested that in the future the waivers might be combined in an Independence Plus Waiver format which would include personal care assistance services. Costs may be incurred but would be offset by delaying or preventing more expensive institutionalization.
- The Blueprint for the Future includes funding for the Center for Medicare Advocacy to ensure that all Medicare beneficiaries have access to free legal assistance in order to help them obtain the Medicare coverage to which they are entitled and the healthcare that they need. Over the past fifteen years well over \$200 million dollars has been returned to Connecticut Medicaid as a result of successful Medicare appeals.
- Finally, the future should include adequate funding for the CHOICES (Connecticut's Program for Health Insurance Assistance, Outreach, Information and Assistance, Counseling and Eligibility Screening) Program. The program provides valuable information to older adults via information and referral and is operated by the Area Agencies on Aging.

### **For additional information, contact:**

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### **Sources**

Connecticut Commission on Aging. 2000-2001 Annual Report  
Connecticut Department of Social Services (Home Care at a Glance) SFY 2000 Annual Report to the Legislature